

RECEIVED
CENTRAL FAX CENTER

JAN 13 2006

LEVINE BAGADE LLP



2483 East Bayshore Road
Suite 100
Palo Alto, CA 94303
Tel: (650) 242-4211
Fax: (650) 284-2180
Customer No. 40518

FAX

To:	Commissioner for Patents	From:	Shirley Laboy
Fax:	(571) 273-8300	Pages:	2 (including cover page)
Phone:		Date:	January 13, 2006

Comments: **OFFICIAL FILING**

Application No.: 10/622,437

Filing Date: July 18, 2003

Title: EMBOLIZATION DEVICE AND A METHOD OF USING THE SAME

Inventor(s): Thomas J. FOGARTY

Examiner: Not Yet Assigned

Group Art Unit: 3731

Attorney Docket No.: FRGTN200200

Papers attached:

1. Change of Correspondence Address

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on the date shown below.

Date: 1.13.2006

Signature:  (Shirley Laboy)

BEST AVAILABLE COPY

PTO/SB/123 (04-05)

Approved for use through 07/31/2005, OMD 0651-0035

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

CHANGE OF CORRESPONDENCE ADDRESS Application Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Application Number	10/E22-437
	Filing Date	July 18, 2003
	First Named Inventor	Thomas J. FOGARTY, et al
	Art Unit	3731
	Examiner Name	Not Yet Assigned
	Attorney Docket Number	FGRT N-2002-00-US

RECEIVED
CENTRAL FAX CENTER
JAN 13 2006

Please change the Correspondence Address for the above-identified patent application to:

☒ The address associated with Customer Number: 40519

OR

☐ Firm or Individual Name

Address

City State Zip

Country

Telephone Email

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124)

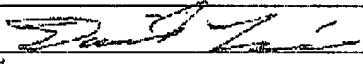
I am the:

☐ Applicant/Inventor

☐ Assignee of record of the entire interest.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

☒ Attorney or agent of record. Registration Number 48,821

☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Signature 

Typed or Printed Name David A. Levine

Date January 13, 2006 Telephone 650 242-4214

NOTES: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required; see below.

☒ Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.31 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual user. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing this form, call 1-800-PTO-9199 and select option 2.

BEST AVAILABLE COPY